

[illegible]

Application Number

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11	1					
12		1				
13	1					
14		1				
15		2				
16		2				
17		2				
18		1				
19		1				
20		2				
21		1				
22		1				
23		1				
24		1				
25		1				
26	1	1				
27		1				
28		2				
29		2				
30		2				
31		1				
32		1				
33	1					
34		1				
35		1				
36		2				
37		1				
38	1					
39		1				
40		1				
41	1					
42		1				
43		1				
44	1					
45		1				
46		2				
47	1					
48	1					
49						
50						
Total Indep	10					
Total Depend	45					
Total Claims	55					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						